# PASCUA YAQUI TRIBE REGIONAL PARTNERSHIP COUNCIL FUNDING PLAN

July 1, 2009 – June 30, 2012

#### **OVERVIEW OF THE THREE YEAR STRATEGIC DIRECTION**

### I. Regional Needs and Assets

In February 2008, the Pascua Yaqui Tribal Council passed a resolution supporting the tribe as a separate region within First Things First. This decision has allowed the Pascua Yaqui Tribe to consider increasing the early childhood development and health services to children birth to five on the federally recognized reservation land located in Pima County. This community, known as New Pascua, is the designated recipient of the First Things First allocation according to the Arizona Early Childhood Development and Health Board state statute. Pascua Yaqui Tribe has seven other traditional communities in Pima, Maricopa and Pinal County where the Tribal government also provides services, but these communities do not have allocations from First Things First. Other Regional Partnership Councils may decide to serve Pascua Yaqui Tribal children that reside or access services within their area.

Census Data	Population Birth to 5 2000	Population Birth to 5 2008	Poverty Population Birth to 5 2008
Pascua Yaqui Tribe (New Pascua)	450	420	216

<sup>\*</sup>AZECDH Board Approved 2008 First Things First Regional Allocation spreadsheet (based on 2007 U.S. Census Population Estimate Projections)

In June 2008, the Pascua Yaqui Tribe elected a new Tribal Council made up of eleven officials. Due to the election, there were also new Council Oversight Committees for Education, Health and Social Services. Those committees are comprised only of Tribal Council Members and were established by ordinance. First Things First staff and Regional Partnership Council members worked very closely with the new Tribal Leaders and Division Directors during this transition and yet because of the timelines for First Things First in relation to the election and establishment of various committees, this Regional Partnership Council had to forego the work associated with a formal needs and assets report. However, both First Things First and Tribal staff, as well as the appointed volunteers, worked alongside the Tribal Education Division Interim Director to accomplish much of the legwork needed to develop the partnership with tribal leaders and bring us to this point of writing the plan.

One of the organizational changes that took place in early 2008 prior to the FTF Regional Council formation was the creation of a new Tribal law called the Research Protection Ordinance. This ordinance is the protocol for all data collection within the Pascua Yaqui Tribe. The Regional Council could not collect any data for the Needs and Assets Report until the Research Review Committee and the Tribal Council gave them approval.

This was the largest factor affecting the completion of the Needs and Assets Report for this Region. Because the Regional Council could not even begin the data collection which would result in a report, a letter requesting an extension for November 2008 was submitted to the State Board in August 2008. The Research Review Committee and Tribal Council were finally able to approve data collection on November 5, 2008 so now the Regional Council can begin to work with a consultant and staff to write this report.

Even though the Regional Partnership Council did not have the Pascua Yaqui Tribe Needs and Assets Report to review and use during the Strategic and Funding Plan process, the Regional Partnership Council decided to form Strategy Workgroups with community members to keep the work moving forward. These Strategy Workgroups held different meetings to discuss the needs identified by the Regional Council members and to recommend possible strategies and costs to the full Regional Council. The Regional Council and community members that participated in these meetings were people who work every day with Pascua Yaqui families and children through the Health, Education and Social Services tribal departments. In October 2008, the Strategy Workgroups presented their recommendations to the Regional Partnership Council.

The lack of quality child care for all ages and most markedly for infants and toddlers was a universal need. There is one high quality preschool program operated by Pascua Yaqui Head Start that provides services to 130 children. This program, due to funding restrictions, has eligibility requirements that exclude several children. Even so, they are at capacity with many children on a waiting list. Clearly, building the capacity of high quality early care and education programs will be a priority for funding. Family child care homes may be the most appropriate approach to take to deal with capacity during the next three years. In the long-term the Tribe may explore the creation of a child care facility or expansion on the reservation through an Intergovernmental Agreement (IGA) with the Pascua Yaqui Tribe and the State/ First Things First. Various stakeholders from the tribal community may be willing to partner, for instance, the Tribal Council may decide to provide a facility and the Social Services Department could provide the staff. Perhaps the Pascua Yaqui Tribe Regional Partnership Council could locate or allocate resources to invest in a part-time coach, a start-up grant, or some incentive to become regulated or licensed, as well as operational costs. If this center became reality it would also apply for Quality First! after it becomes regulated or licensed and would experience all the benefits associated with that new part of the system of improvement that leads to high quality child care.

The Pascua Yaqui Tribe Regional Partnership Council has committed support for high quality settings for children by working within the state's new quality improvement system. Families frequently select child care based on cost and location. They do not always understand the importance of a high quality child care or education setting nor do they know what to look for when seeking care for their child. This Regional Council believes that *Quality First!* will support programs in raising their level of quality through the support of a coach/mentor, improvement grants, and professional development scholarships. It will also implement a rating system to help local families quickly identify child care settings that are optimal for their child's development.

Closely tied to high quality child care is the need for highly qualified teachers and caregivers. The teacher or caregiver's level of education is one of the greatest indicators of quality. Much can be done to impact the level of quality, if teacher education levels can be increased. Providing scholarships and financial support for early childhood educators to continue their formal education will be a valuable investment with a high return. As early childhood teachers achieve higher levels of education, there should be also some level of compensation provided and this Regional Council is hoping the state will address this need alongside its other quality initiatives.

The region has no hospital and only one health clinic. Through Indian Health Services (IHS), the tribe has a contract with El Rio Clinics to provide medical and dental treatment as well prenatal care to tribal members on and off the reservation. In order to receive these services the tribal member needs to apply for AHCCCS. Indian Health Services covers these services if the tribal member does not qualify for AHCCCS and if this person presents to IHS the denial letter from AHCCCS. The Pascua Yaqui Tribe does not provide support for medical coverage to tribal members, and starting this fiscal year, the tribal employees will cover the co-payment cost of their medical insurance. According to this information provided by Regional Partnership Council members, there is a clear need to register more children who are not enrolled but are eligible for AHCCCS or Kids Care health insurance. If the child does not qualify for AHCCCS, at least the family will have the denial letter to request the payment for their child's medical bill to IHS and not end in a financial crisis in order to access services for their child. The Pascua Yaqui Tribe Health Department has successful programs that we can build on for this need such as: WIC, Maternal Child Health, Dental Clinic, and Healthy Families. With multiple points of entry into service, it behooves the First Things First Pascua Yaqui Tribe Regional Partnership Council to provide outreach activities to families with children birth to five or families expecting a child, public insurance enrollment information as well as early childhood development and health educational materials. Parent education level or knowledge of child development (particularly that of the mother) is a key predictor of child achievement in school.

The Pascua Yaqui Tribe Regional Partnership Council prioritized the following needs to address in the next three year period:

- 1. Lack of child care providers;
- 2. Improve early care through education of educators and child care providers, and
- 3. Newborns and children at risk for not having their health, nutrition, and developmental needs met.

#### II. Prioritized Goals and Key Measures

#### Need: Lack of child care providers

Goal # 1: FTF will improve access to quality early care and education programs and settings.

Goal #3: FTF will increase availability and affordability of early care and education settings.

#### Key Measures:

- Total number of early care and education programs participating in the QIRS system.
- Total number of children enrolled in early care and education programs participating in QIRS system.
- Total number and percentage of early care and education programs on the reservation.
- Total number of children enrolled and vacancies in regulated early care and education programs as a proportion of the total population birth to age five, especially 0-3 year olds.

#### Need: Improve early care through education of educators and child care providers

Goal #8: FTF will build a skilled and well prepared early childhood development workforce.

#### Key Measures:

- Total number and percentage of professionals working in early childhood development settings with a credential, certificate, or degree in early childhood development.
- Total number and percentage of professionals working in early childhood development who are pursuing a credential, certificate or degree.

# Need: Newborns and children are at risk for not having their health, nutrition, and developmental needs met

Goals #4: FTF will collaborate with existing Arizona early childhood health care systems to improve children's access to quality health care.

#### Key Measures:

- Total number and percentage of children with health insurance.
- Total number and percentage of children receiving appropriate and timely well-child visits.
- Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health.

#### **III. Strategy Selection**

The Pascua Yaqui Tribe reservation has many needs and First Things First funding will allow the Regional Partnership Council to begin supporting the development of the infrastructure and services to create better outcomes for children. The proposed strategies build on the foundational strategic planning of the Regional Partnership Council. These initial strategies will serve as the beginning of a great work in progress because of the Regional Council.

The Pascua Yaqui Tribe Regional Partnership Council will continue to engage with other stakeholders and partners to plan for and evaluate the implementation of the strategies toward the goals and key measures. The Regional Council will continue the strategic planning process for the next two years, as we develop further understanding and a baseline of work. With continued community input, stronger coordination between First Things First, Regional Partnership Council, Pascua Yaqui Tribal Council, tribal departments, and community, and clear long-term strategic goals, collaborations and capacity will be built.

<b>Identified Need</b>	Goal	Key Measures	Strategy
Lack of child	Goal #3: FTF will	-Total number and	Recruit child care home
care providers	increase availability	percentage of early care	providers to expand the
	and affordability of	and education programs	number of
	early care and	on the reservation.	regulated/certified early care
	education settings.		settings, particularly those
		-Total number of children	that provide services to
		enrolled and vacancies in	children birth-3 years during
		regulated early care and	non-traditional hours.
		education programs as a	
		proportion of the total	Service Number:
		population birth to age	5 family child care homes.
		five, especially 0-3 year	
		olds.	
	Goal # 1: FTF will	-Total number of early	Enroll existing Family Child
	improve access to	care and education	Care Programs in Quality
	quality early care and	programs participating in	First! During the 2 <sup>nd</sup> and 3 <sup>rd</sup>
	education programs	the QIRS system.	year.
	and settings.		
		-Total number of children	Service Number:
		enrolled in early care and	3 family child care homes in
		education programs	the 2 <sup>nd</sup> year and 4 in the 3 <sup>rd</sup>
		participating in QIRS	year grant cycle.
		system.	

Improve early care through education of educators and child care providers.	Goal #8: FTF will build a skilled and well prepared early childhood development workforce.	-Total number and percentage of professionals working in early childhood development settings with a credential, certificate, or degree in early childhood development.  -Total number and percentage of professionals working in early childhood development who are pursuing a credential, certificate or degree.	Expand access to T.E.A.C.H. scholarships beyond those provided through participation in Quality First!.  Service Number: 2 early care and education Teachers enrolled.
Newborns and children are at risk for not having their health, nutrition, and developmental needs met.	Goals #4: FTF will collaborate with existing Arizona early childhood health care systems to improve children's access to quality health care.	-Total number and percentage of children with health insurance.  -Total number and percentage of children receiving appropriate and timely well-child visits.  -Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health.	Increase outreach and enrollment assistance for public health insurance to eligible but not yet enrolled families and provide early childhood development and health information to families during outreach activities.  Service Number: 15% of Children Birth to five & 15% expectant mothers.

#### **Strategy Worksheet**

Strategy #1: Recruit child care home providers to expand the number of regulated/certified early care settings, particularly those that provide services to children birth-3 years during non-traditional hours.

State licensing regulations are considered adequate and minimal and do not include quality determiners, i.e. optimal recommended adult-child ratios, maximum group size, well-qualified personnel, and strong curriculum and environments. Many children are in settings where quality is poor or mediocre <sup>1</sup> and poor quality settings may harm children or may be a barrier to optimal development.

The success of this strategy will be closely tied to the relationship between the recruiter/mentor, the child care home providers and the community with one part-time staff position who will recruit family child care providers on the Pascua Yaqui Tribe reservation (New Pascua) in SFY 2010:

One part-time staff will recruit, support and recommend five new prospective certified or regulated child care homes on the reservation. This individual will provide mentoring and training to providers to become certified or regulated child care homes. Training examples include child care best practice, business practices, CPR/First Aid. Recruiter/coach needs a child development background and must be trained on the Early Childhood Environmental Rating Scale (ECERS) and become familiar with other assessment instruments to be used in the Quality First! system.

<u>Provide funds</u> to cover the costs of shifting an unregulated family child care home to the new status of certified or regulated through D.E.S.

#### Start up Grant

This one-time grant is designed to help defray the costs associated with start-up such as minor remodeling, fencing, furniture purchases, etc. Only when identified providers actually apply for regulation or certification, they will receive this grant.

During the first year, recruitment of 5 unregulated to regulated or brand new child care home providers will take place. During the second and third year, Quality First! will be implemented with these settings only if the family child care homes have become regulated/certified. Commitment agreements with family child care home providers to enter Quality First! in year two and three will be made.

The Pascua Yaqui Tribe reservation has a great need for child care for children who are eligible for Pascua Yaqui Head Start but are not receiving services due to lack of capacity. There are also children who are attending Head Start but need wrap-around child care during non-traditional hours, and there is very little child care for children birth to three in this community. The Strategy Workgroup participants mentioned that families living in the Pascua Yaqui community work graveyard shifts at the casinos and need child care providers on the reservation who can provide service during these hours. This strategy is intended to recruit currently unregulated child care homes to become regulated or certified. It will also recruit new family child care providers on the reservation in order to expand services for infant/toddler care which are currently quite limited.

One approach to ensure that this strategy works on the reservation would be through an Intergovernmental Agreement (IGA) between the Tribe and the State/ First Things First. The Social Services Department could be the tribal sponsor program. This IGA would:

- Explain that this is a provision of funding to a program already with access to the target population and has willingness to accept the resources and conduct the work;
- Describe how the child care providers will be engaged and what type of information and services will be provided to them to become certified or regulated through state or tribal agencies;
- Describe coordination with tribe for ongoing data collection and submission to FTF database.

1 Bryant. D., Bernier, K., Maxwell K., & Peisner-Feinberg, E. (2001) *Validating North Carolina's 5-star child care licensing system.* Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center

Lead Goal: FTF will increase availability and affordability of early care and education settings.

#### **Key Measures:**

- 1. Total number and percentage of early care and education programs on the reservation.
- 2. Total number of children enrolled and vacancies in regulated early care and education programs as a proportion of the total population birth to age five, *especially 0-3 year olds*.

#### **Target Population:**

New and existing family child care home providers on the reservation that will provide services especially for children birth to three and children who are eligible for Pascua Yaqui Head Start but are not receiving services due to lack of capacity and children who are attending Head Start and need wrap around care during non-traditional hours.

Proposed Service Numbers	SFY2010 July 1, 2009 - June 30, 2010	SFY2011 July 1, 2010 – June 30, 2011	SFY2012  July 1, 2011 -  June 30, 2012
	5 family child		
	care homes		

#### **Performance Measures SFY 2010:**

1. # of new family child care homes providing care for children infant through preschool/ 5 homes- actual service number

# • How is this strategy building on the service network that currently exists:

There are family child care homes that currently exist on the reservation. This strategy is intended to build on that asset by providing outreach, recruitment and then incentives in the form of start-up grants, coaching and mentoring as an incentive to become regulated or licensed. This strategy also encourages the expansion of new family child care providers and to expand their services to include infant and toddler care. A requirement for receiving FTF funding will be to encourage enrollment into Quality First! in the second or third year of the grant cycle. This will provide the new child care setting with the supports needed for continuous quality improvement.

#### • What are the opportunities for collaboration and alignment:

1. All programs funded for this strategy will participate in Quality First! in the second or third year of operation. The Quality First! umbrella will provide a framework for alignment with standards of quality. Participating programs will also have the added benefit of T.E.A.C.H.

- 2. There are opportunities to make connections between existing service providers and/or programs in this area such as the Tribal Head Start and Social Services Department. Collaboration with the Pascua Yaqui Tribe Head Start to access their data (i.e. their enrollment and waiting list) and with Social Services Department to have information regarding the existing family child care home providers on the reservation.
- 3. The approach to make this strategy work on the reservation would be through a possible Intergovernmental Agreement (IGA) between the Tribe and the State/ First Things First.
- 4. North and South Pima Regional Partnership Councils have identified outreach to potential providers as one of their goals as well, providing opportunities for cross-regional collaboration.

# **SFY2010 Expenditure Plan for Proposed Strategy**

Population-based Allocation for proposed	\$62,500
strategy	

#### **Budget Justification:**

#### One Part-time staff to recruit and mentor (Coach): \$25,000

Costs include salary, mileage, instruction, and supplies. New Pascua is a small community, so the costs of mileage will be inexpensive. This part-time staff will recruit and mentor five family child care homes. This individual will be under contract for one year, so she/he would not be eligible for benefits.

#### <u>Certified by DES: \$2,500 per home x 5 homes = \$12,500</u>

Through consulting with D.E.S. staff, it was determined that \$2,500 would adequately cover the costs of supporting a family child care home in becoming regulated or licensed.

#### Start up Grant: \$5,000 per home x **5** homes= **\$25,000**

This is a one-time grant to help defray the costs associated with start-up such as possible minor remodeling, fencing, furniture purchases, etc. Once the identified providers actually apply for regulation or certification is when they receive this grant.

Total: \$ 62,500

# Strategy #2: Enroll existing Family Child Care Programs in Quality First! during the 2<sup>nd</sup> and 3<sup>rd</sup> year.

The First Things First Board approved funding to design, build and implement the first phase of *Quality First!*, Arizona's Quality Improvement and Rating System (QIRS) for early care and education centers and homes. Because so many of Arizona's youngest children are enrolled in child care, early education and preschool settings, the quality of programs is undeniably important. Just 15% of early care and education centers and less than 1% of family child care homes in Arizona are accredited by a national accreditation system, currently the only measure of high-quality available in the state.

This strategy will expand the number of family child care homes in Pascua Yaqui Tribe region participating in Quality First! beyond those funded through the statewide initiative. The current estimate provided by FTF for the statewide Quality First! initiative will be to fund 1 center and probably 5 homes in this region. The Pascua Yaqui Tribe Regional Partnership Council believes that Quality First! is an important investment that will significantly improve the quality of child care and early education for children.

This strategy will focus on newly recruited and regulated family child care homes on the reservation in year one that provide services to children who are in the Pascua Yaqui Head Start waiting list, children who are attending Head Start and need wrap around care during non-traditional hours, as well as children birth to three.

**Lead Goal:** FTF will improve access to quality early care and education programs and settings.

### **Key Measures:**

- 1. Total number of early care and education programs participating in the QIRS system.
- 2. Total number of children enrolled in early care and education programs participating in QIRS system.

#### **Target Population:**

Newly recruited and regulated Family Child Care Homes on the reservation in year one that provide services especially for children birth to three, as well as children who are in the Pascua Yaqui Head Start waiting list or are attending Head Start and need wrap around care during non-traditional hours.

	SFY2010	SFY2011	SFY2012
Proposed Service Numbers	July 1, 2009 - June 30, 2010	July 1, 2010 – June 30, 2011	July 1, 2011 - June 30, 2012
		<b>3</b> family child care homes	4 family child care homes

#### Performance Measures SFY 2011-2012:

- 1. # of Family child care homes served through Quality First!/FY2011- 3 homes, FY2012 4 homes served through Quality First!
- How is this strategy building on the service network that currently exists: FTF will fund 1 center and probably 5 homes through the QIRS statewide grant. Pascua Yaqui Tribe

Regional Partnership Council will build on the state system by funding 3 additional homes in the second year and 4 in the third year of the grant cycle in the region. This strategy will allow this Regional Partnership Council to fund homes that might not have been included in the statewide QIRS.

#### • What are the opportunities for collaboration and alignment:

- 1. This strategy will allow for excellent alignment with the statewide initiative since it will be expanding on that system. Through the components of Quality First!, collaborations between agencies offering the supports will be expanded and improved.
- 2. There are opportunities to make connections between existing service providers and/or programs in this area such as the Pascua Yaqui Tribe Social Services Department., including to have information regarding the existing family child care homes providers on the reservation.
- 3. North, Central, and South Pima and Tohono O'odham Nation Regional Partnership Councils have identified this strategy as one of their goals as well, providing opportunities for cross-regional collaboration.

## **SFY2010 Expenditure Plan for Proposed Strategy**

Population-based Allocation for proposed	\$68,850 (second year of the grant cycle)
strategy	\$91,800 (third year of the grant cycle)

#### **Budget Justification:**

Child care homes: \$22,950 per year x **3** child care homes in second year = \$68,850 Child care homes: \$22,950 per year x **4** child care homes in third year = \$91,800

These numbers are based on 12 months of enrollment because the QIRS will operate throughout the year. The enrollment cost includes all components of QUALITY FIRST! for centers and homes: Coaching, Assessments, Child Care Health Consultation, T.E.A.C.H., enrollment incentive, quality improvement grant, and quality improvement award.

# Strategy #3: Expand access to T.E.A.C.H. scholarships beyond those provided through participation in Quality First!

The educational level of the staff working with children directly impacts the quality of the child's experience. The Pascua Yaqui Tribe Regional Partnership Council wants to support the child care workforce in obtaining a higher educational level whether that is with a CDA certificate, Associate's Degree, or Bachelor's Degree through the T.E.A.C.H. program.

*Benefits to children*: higher quality; stable and more capable professionals; improved care and services; better developmental outcomes for children.

Benefits to families: early childhood professionals who remain with their programs and continuously advance their skills and knowledge are better able to build relationships with children and families and to foster their growth and development.

Benefits to programs and staff: support and financial assistance for ongoing professional development and educational pathways for staff leading to higher staff quality and better retention.

The Regional Partnership Council recognizes and supports all four elements of the scholarship program:

**Scholarships** - The scholarship usually covers partial costs for tuition and books or assessment fees.

Many scholarships require that the recipient receive paid release time and a travel stipend.

**Education** - In return for receiving a scholarship, each participant must complete a certain amount of education, usually in the form of college coursework, during a prescribed contract period.

**Compensation** - At the end of their contract, after completing their educational requirement, participants are eligible to receive increased compensation in the form of a bonus (ranging from \$100 to \$700) or a raise (4% or 5%). Arizona will establish the formulas for each.

**Commitment** - Participants then must honor their commitment to stay in their child care program or the field for six months to a year, depending on the scholarship program that Arizona designs.

Funding support can cover coursework: tuition, fees, materials and books associated with the course and the course activities and travel stipend. As well as a compensation in the form of a bonus for completion of step.

Information about the T.E.A.C.H. Early Childhood Arizona project is available on the web at <a href="https://www.child.careservices.org/ps/teach.html">www.child.careservices.org/ps/teach.html</a>. State contacts are available at <a href="https://www.child.careservices.org/ps/statecontacts.html">www.child</a> <a href="https://www.child.careservices.html">www.child</a> <a href="https://www.child.careservices.html">www.child</a> <a href="https://www.child.careservices.html">www.child</a> <a href="https://www.child.careservices.html">www.child</a> <a href="https://www.child.careservice

Lead Goal: FTF will build a skilled and well prepared early childhood development workforce.

#### **Key Measures:**

- 1. Total number and percentage of professionals working in early childhood development settings with a credential, certificate, or degree in early childhood development.
- 2. Total number and percentage of professionals working in early childhood development who are pursuing a credential, certificate or degree.

#### **Target Population:**

Cantar based and bases	basad sus, idags if algoration	participating in Quality First!
t enter based and nome	nasen proviners il aireany	narricinating in Utlatity First

	SFY2010	SFY2011	SFY2012
Proposed Service Numbers	July 1, 2009 - June 30, 2010	July 1, 2010 – June 30, 2011	July 1, 2011 - June 30, 2012
	2	2	2

#### Performance Measures SFY 2010-2012:

- 1. # of professionals working in early care and education pursuing a degree in early childhood/ 2 actual service number
- 2. # of professionals with a CDA Credential working in early care and education / proposed service numbers
- 3. # of professionals with degree in early childhood education/ proposed service numbers
- How is this strategy building on the service network that currently exists:

This strategy will utilize local colleges and universities to deliver the courses needed for scholars to complete their educational goals. It will build on the statewide T.E.A.C.H. system.

#### • What are the opportunities for collaboration and alignment:

- The T.E.A.C.H. Early Childhood Arizona program will provide the system infrastructure to implement this strategy including an administrative home, payment system, model agreements with colleges/universities, and evaluation. Regional Partnership Council participation with the administrative agent will provide the financing for additional scholarships and focusing scholarships to meet our specific regional needs.
- Cohorts of staff from various early care and education programs might be created to mentor students to increase retention efforts. The Pascua Yaqui Tribe already has an agreement with Pima Community College addressing professional development such as ECE classes in order to have a certificate or degree.
- 3. Collaboration with Central Pima Regional Partnership Council who may purchase additional T.E.A.C.H. scholarships for the Pascua Yaqui Tribe region, beyond those provided through participation in Quality First! since it is likely that they will not enroll as many scholars as desired in the first year.

# SFY2010 Expenditure Plan for Proposed Strategy

Population-based Allocation for proposed	\$4,200
strategy	

#### **Budget Justification:**

\$2,100 per scholar

This amount includes:

\$1,600 - 80% Tuition & Fees

80% Books & Materials

Travel stipend

\$500 – compensation in the form of a bonus for completion of step

(this may change according to the T.E.A.C.H. statewide initiative)

\$2,100 x 2 scholars= \$4,200

Strategy #4: Increase outreach and enrollment assistance for public health insurance to eligible but not yet enrolled families and provide early childhood development and health information to families during outreach activities.

Provide public health insurance enrollment materials and early childhood development and health information and supplies to four existing tribal programs that already host a number of other health services and would be viable sources for outreach. The Pascua Yaqui Tribe Health Department has successful programs that we can build on for this strategy such as: WIC, Maternal Child Health, Dental Clinic, and Healthy Families. During outreach activities, these programs would serve families with children birth to five or families expecting a child and will provide them with public insurance enrollment assistance as well as educational materials on:

- Oral Health (Dental Clinic),
- Prenatal Care (WIC and Maternal Child Health), and
- Early Childhood Development and Health (Healthy Families).

Insured children are more likely to have access to health care for preventive care and treatment. Families without health insurance experience high out-of-pocket costs when their children lack coverage. Lack of health insurance can threaten families' economic security. <sup>1</sup>

Providing early childhood development and health information to Pascua Yaqui families through tribal service providers that come into contact with parents with children birth to age 5 will have a positive impact in the community because more children can receive insurance, early oral health check-ups, and pregnant mothers can begin prenatal care to insure better birth outcomes for the developing child.

The approach to make this strategy work on the reservation would be through an Intergovernmental Agreement (IGA) between the Pascua Yaqui Tribe and the State/ First Things First. The Maternal Child Health Program could be the tribal sponsor program. This IGA would:

- Explain that this is a provision of funding to a program already with access to target population and has willingness to accept the resources and conduct the work;
- Describe how the families will be engaged and what type of information and services will be

#### provided to them;

• Describe coordination with tribe for ongoing data collection and submission to FTF database.

**Lead Goal:** FTF will collaborate with existing Arizona early childhood health care systems to improve children's access to quality health care.

#### **Key Measures:**

- 1. Total number and percentage of children with health insurance.
- 2. Total number and percentage of children receiving appropriate and timely well-child visits.
- 3. Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health.

#### **Target Population:**

4 tribal programs (WIC, Maternal Child Health, Dental Clinic, and Healthy Families) that are going to provide public health insurance enrollment materials and early childhood development and health information to families with a child birth to five or families expecting a child who are eligible but not currently enrolled in public health insurance programs.

Proposed Service Numbers	SFY2010	SFY2011	SFY2012
	July 1, 2009 - June 30, 2010	July 1, 2010 – June 30, 2011	July 1, 2011 - June 30, 2012
	15% of Children	15% of Children	15% of Children
	Birth to five &	Birth to Five &	Birth to Five &
	15% expectant	15% expectant	15% expectant
	mothers	mothers	mothers

#### Performance Measures SFY 2010-2012:

- 1. % of children and expectant mothers with health insurance
- 2. % of children getting dental visit before age 1
- 3. % of expectant mothers receiving regular prenatal care
- 4. % of families showing increases in parenting knowledge and skill after receiving early childhood development and health information over a three year period.

#### • How is this strategy building on the service network that currently exists:

The Pascua Yaqui Tribe Health Department has successful programs that we can build on for this strategy such as: WIC, Maternal Child Health, Dental Clinic, and Healthy Families. Additional partners include organizations that have provided outreach and enrollment assistance, such as El Rio Clinics, hospitals, AHCCCS and Kids Care.

#### • What are the opportunities for collaboration and alignment:

The approach to make this strategy work on the reservation would be through an
Intergovernmental Agreement (IGA) between the Pascua Yaqui Tribe and the State/ First Things
First. This strategy will provide early childhood development and health information and public
health insurance enrollment materials and supplies to 4 Tribal programs (WIC, Maternal Child
Health, Dental Clinic, and Healthy Families) that work with Pascua Yaqui families with children

<sup>&</sup>lt;sup>1</sup> Miller, M., Vigdor, E.R., Manning, W.G. (2004). Covering the Uninsured: What is it worth? Health Affairs.

birth to five or families expecting a child.

2. North and South Pima Regional Partnership Councils have identified this strategy as one of their goals as well, providing opportunities for cross-regional collaboration.

# **SFY2010 Expenditure Plan for Proposed Strategy**

Population-based Allocation for proposed strategy

\$26,265

#### **Budget Justification:**

\$6,566.25 x 4 tribal programs = **\$26,265** 

Costs include public health insurance enrollment materials and early childhood development and health information and supplies to 4 tribal programs.

# IV. Summary Financial Table for SFY 2010 (July 1, 2009-June 30, 2010)

Revenue	
Population Based Allocation SFY2010	\$104,849
Expenditure Plan for SFY2010 Allocation	
Strategy 1: Recruit Child Care Providers	\$62,500
Strategy 2: Quality First	\$0
Strategy 3: TEACH	\$4,200
Strategy 4: Increase Outreach	\$26,265
Communication- Cross Region	\$0
Evaluation- Cross Region	\$0
Regional Needs & Assets- Cross Region	\$0
Subtotal of Expenditures	\$92,965
Fund Balance (undistributed regional	
allocation in SFY2010)*	\$11,884
Grand Total (Add Subtotal and Fund Balance)	\$104,849

Strategy # 1 will be implemented only in FY2010. A fund balance has been intentionally built into the budget to provide funding in FY2011 and FY2012 for Strategy #2 which is Quality First!

Southeast Arizona Regional Partnership Councils are partnering in these three areas: Communication, Evaluation and Needs and Asset Reports because we understand the importance of coordinating these activities from a regionally-based standpoint which goes beyond what the state's scope of work is able to provide for these items. The Pascua Yaqui Tribe Regional Partnership Council will be requesting

discretionary funds to contribute to these three cross regional strategies, in particular, funds that will allow them to create a Needs and Assets Report in the next two years.

# V. Building the Early Childhood System and Sustainability – Three Year Expenditure Plan: July 1, 2010 through June 30, 2012

Revenue	FY 2010	FY 2011	FY 2012	Total
	Ċ404 040	(estimated)	(estimated)	6244547
Population Based Allocation	\$104,849	\$104,849	\$104,849	\$314,547
Fund Balance (carry forward from				
previous SFY)	N/A	\$11,884	\$17,418	
Expenditure Plan	FY 2010	FY 2011	FY 2012	Total
Strategy 1: Recruit Child Care				
Providers	\$62,500	\$0	\$0	\$62,500
		•	,	
Strategy 2: Quality First	\$0	\$68,850		\$160,650
Strategy 3: TEACH	\$4,200	\$4,200	\$4,200	\$12,600
Strategy 4: Increase Outreach	\$26,265	\$26,265	\$26,265	\$78,795
Communication- Cross Region	\$0	\$0	\$0	\$0
Evaluation- Cross Region	\$0	\$0	\$0	\$0
Regional Needs & Assets- Cross				
Region	\$0	\$0	\$0	\$0
Subtotal Expenditures	\$92,965	\$99,315	\$122,265	\$314,545
Fund Balance* (undistributed				
regional allocation)	\$11,884	\$17,418	\$2	
Grand Total	\$104,849	\$116,733	\$122,267	

Strategy #1 and #2 (family child care homes) are the most appropriate approach during the next three years and in the long-term to prepare the creation of a child care center on the reservation. There is tremendous opportunity for Pascua Yaqui Tribe, First Things First and other community stakeholders to enter into a partnership in order to provide a facility that will significantly impact the life of Yaqui children by giving all children a quality educational experience. If a facility was established, it would also

apply for Quality First! after it became licensed.

Cross Regional Allocations: Southeast Regional Partnership Councils are collaborating with each other to fund Needs & Assets reports, evaluation, and communication. The region understands the importance of aligning with statewide initiatives and plans. The cross regional funding allocations will allow the Southeast Region to go beyond the state plan and aid in underserved areas of the Southeast Region.

### VI. Discretionary and Public/Private Funds

Based on the possible agreement to fund the potential child care center on the reservation, the Pascua Yaqui Tribe Regional Partnership Council will seek discretionary funding and private/public dollars with potential costs estimated at \$500,000 to \$600,000 to cover construction or remodeling, licensing and start-up operations.

The Regional Partnership Council will also request discretionary funds to collaborate and support SE cross regional strategies such as Needs & Assets reports, evaluation, and communication. The estimated contribution is approximately \$33,000 over the next three years (1% of allocation for communications, 3% evaluation and \$20,000 for two Needs and Assets reports).